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CONFIRMATION NO. 4876

<b>SERIAL NUMBER</b> 10/501,738	<b>FILING OR 371(c) DATE</b> 07/16/2004 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1615	<b>ATTORNEY DOCKET NO.</b> 03715.0139
<b>APPLICANTS</b> Nathalie Cartier-Lacave, Paris, FRANCE; Patrick Aubourg, Boulogne-Billancourt, FRANCE; Muriel Ashueur, Paris, FRANCE; Sonia Benhamida, Paris, FRANCE; Francoise Pflumio, Vitry Sur Seine, FRANCE;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IB02/05698 12/06/2002 which claims benefit of 60/337,078 12/06/2001				
<b>** FOREIGN APPLICATIONS *****</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 31
Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>INDEPENDENT CLAIMS</b> 2		
<b>ADDRESS</b> 22852				
<b>TITLE</b> Use of cd34+ hematopoietic progenitor cells for the treatment of cns disorders				
<b>FILING FEE RECEIVED</b> 1248	FEES: Authority has been given in Paper - No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	